Case 19-10401-SDM Doc 6 Filed 02/11/19 Entered 02/11/19 11:43:41 Desc Main

		17/7/41110	.111 1 1/1/11 1 1 1 1 1 1 1 1 1 1 1 1 1		
Fill in this info	rmation to identify your	case:			
Debtor 1	Stephanie Renee	Ray			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
Case number	19-10401				
(if known)				☐ Check if this amended fili	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your as	a a ta
			f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,415.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,415.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	13,498.97
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	3,080.13
	Your total liabilities	\$	16,579.10
Pai	t 3: Summarize Your Income and Expenses	ļ	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,243.49
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,005.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Page 2 of 37
Case number (if known) 19-10401 Debtor 1 Stephanie Renee Ray

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	0.47.54
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$ 247.51

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document P	age 3 of 37		
Fill in this info	ormation to identify your cas	se and this filing:			
Debtor 1	Stephanie Renee Ra	av			
	First Name		t Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Las	t Name		
(Spouse, il lilling)					
United States	Bankruptcy Court for the: N	ORTHERN DISTRICT OF MISSISS	iPPI		
Case number	19-10401				☐ Check if this is an
					amended filing
Official E	orm 106A/B				
<u>Scneal</u>	ıle A/B: Prope	rty			12/15
hink it fits best. nformation. If m Answer every qu	Be as complete and accurate a nore space is needed, attach a suestion.	ems. List an asset only once. If an as as possible. If two married people are eparate sheet to this form. On the top	filing together, both are e of any additional pages,	equally responsible for su	pplying correct
Part 1: Descri	be Each Residence, Building, La	and, or Other Real Estate You Own or	Have an interest in		
. Do you own o	or have any legal or equitable in	terest in any residence, building, land	l, or similar property?		
■ No. Go to l	Part 2				
_	re is the property?				
□ Tes. Wilei	e is the property:				
Part 2: Descri	be Your Vehicles				
B. Cars, vans, □ No ■ Yes	trucks, tractors, sport utility	y vehicles, motorcycles			
3.1 Make:	Ford	Who has an interest in the pro	nerty? Check one	Do not deduct secured cl	aims or exemptions. Put
Model:	Explorer Eddie Bauer	Debtor 1 only	perty i offect one	the amount of any secure Creditors Who Have Clair	
Year:	2007	Debtor 2 only			
Approxir	nate mileage: 15100			Current value of the entire property?	Current value of the portion you own?
Other inf	formation:	At least one of the debtors a	nd another		
VIN: 11	FMEU64807UB36639	Check if this is community (see instructions)	property	\$6,930.00	\$6,930.00
Examples: B No Yes Add the do pages you Part 3: Descri	oats, trailers, motors, personal ollar value of the portion you have attached for Part 2. With the Your Personal and Househous training the Your Personal and Househousehouse training the Your Personal and Househouse training tra	s and other recreational vehicles al watercraft, fishing vessels, snown a own for all of your entries from rite that number here	Part 2, including any e	ntries for	\$6,930.00 Current value of the portion you own? Do not deduct secured claims or examptions
6. Household	goods and furnishings				claims or exemptions.
	goodo una rannonnigo				

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

	Case 19-10 ²	101-SDM	Doc 6		Entered 02/11/2 Page 4 of 37	19 11:43:41	Desc Main
Debtor 1	Stephanie R	enee Ray		Document F	Case nu	mber (if known) _1	9-10401
■ Yes	s. Describe						
		Dining Roo	m Furnitu	re (100.00), Bedroon re (100.00), Refriger 0), Microwave (20.00	ator (50.00), Stove (25.	00),	\$595.00
□ No	ples: Televisions a	nd radios; audio phones, camer			nt; computers, printers, sca	nners; music colle	ections; electronic devices
		PS3 w/ Gan Personal Ito 2nd TV (100	nes (75.00 ems Value 0.00), 2nd)) e<200.00 Exempt: Blue Ray Player (50), Blue Ray Player (50.0 .00), 3rd TV (175.00), 4 00), DVD Player (25.00)	th	\$1,440.00
		11 (100.00)	, 001111 (1	100.00), 0 11 (100.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Exam ■ No		figurines; paint ons, memorabili			pictures, or other art objec	ts; stamp, coin, or	baseball card collections;
Exam ■ No	ment for sports at ples: Sports, photo musical instrus. s. Describe	graphic, exercis	se, and othe	er hobby equipment; bicy	cles, pool tables, golf clubs	s, skis; canoes and	kayaks; carpentry tools;
□ No		s, shotguns, am	munition, ar	nd related equipment			
		45mm Pisto	ol (150.00))			\$150.00
□ No		othes, furs, leat	her coats, de	esigner wear, shoes, acc	cessories		
		Clothing (3	00.00)				\$300.00
■ No		welry, costume	jewelry, eng	gagement rings, wedding	ı rings, heirloom jewelry, wa	atches, gems, gold	l, silver
Exar ■ No	farm animals mples: Dogs, cats, s. Describe	birds, horses					
■ No	other personal an		ems you di	d not already list, inclu	iding any health aids you	did not list	

Case 19-10401-SDM Doc 6 Filed 02/11/19 Entered 02/11/19 11:43:41 Desc Main Page 5 of 37 Case number (if known) 19-10401 Document Debtor 1 Stephanie Renee Ray 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,485.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... % of ownership: Name of entity: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No

Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

☐ Yes. Give specific information about them...

Case 19-10401-SDM Doc 6 Filed 02/11/19 Entered 02/11/19 11:43:41 Desc Main Page 6 of 37 Case number (if known) 19-10401 Document Debtor 1 Stephanie Renee Ray 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Earned Income Tax Not to Exceed \$5000.00 Per Year Unknown Credit Federal Income Tax Not to Exceed \$5000.00 Per Year Unknown Refund State Income Tax Not to Exceed \$5000.00 Per Year Unknown Refund 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No
Official Form 106A/B
Schedule A/B: Property
page 4

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☐ Yes. Describe each claim.......

Case 19-10401-SDM Doc 6 Filed 02/11/19 Entered 02/11/19 11:43:41 Desc Main Page 7 of 37 Case number (if known) 19-10401 Document Debtor 1 Stephanie Renee Ray ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Nο ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$6,930.00 57. Part 3: Total personal and household items, line 15 \$2,485.00 Part 4: Total financial assets, line 36 \$0.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$9.415.00 Copy personal property total \$9.415.00

Official Form 106A/B Schedule A/B: Property page 5

Total of all property on Schedule A/B. Add line 55 + line 62

\$9,415.00

Case 19-10401-SDM Doc 6 Filed 02/11/19 Entered 02/11/19 11:43:41 Desc Main Document

Fill in this infor	rmation to identify your	case:		
Debtor 1	Stephanie Renee	Rav		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI	
Case number	19-10401			
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Ide	entify the Property \	You Claim as Exempt
-------------	-----------------------	---------------------

Pa	rt 1: Identify the Property You Claim as Ex	xempt						
1.	Which set of exemptions are you claiming?	Check one only, ever	n if yo	ur spouse is filing with you.				
	■ You are claiming state and federal nonbank	cruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)				
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	2007 Ford Explorer Eddie Bauer 151000 miles	\$6,930.00		\$6,930.00	Miss. Code Ann. § 85-3-1(a)			
	VIN: 1FMEU64807UB36639 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	Living Room Furniture (100.00), Bedroom Furniture (200.00), Dining	\$595.00	•	\$595.00	Miss. Code Ann. § 85-3-1(a)			
	Room Furniture (200.00), Brining Room Furniture (100.00), Refrigerator (50.00), Stove (25.00), Washer/Dryer (100.00), Microwave (20.00) Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				

TV (300.00), xBox 360 (75.00), PS4 \$1,440.00 (50.00), Blue Ray Player (50.00), PS3 w/ Games (75.00)

100% of fair market value, up to any applicable statutory limit

\$1.440.00

Personal Items Value<200.00 Exempt: 2nd TV (100.00), 2nd Blue Ray Player (50.00), 3rd TV (175.00), 4th TV (195.00), 5th TV (150.00), 6th TV (195.00), DVD Player Line from Schedule A/B: 7.1

Official Form 106C

Miss. Code Ann. § 85-3-1(a)

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Case number (if known) 19-10401

Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B Line from Schedule A/B: 10.1 Current value of the portion you claim Check only one box for each exemption. Check only one box for each exemption. Specific laws that allow expected to the portion you own Check only one box for each exemption. Shedule A/B 100% of fair market value, up to any applicable statutory limit	·
## Schedule A/B ## Schedule A/B ## \$150.00 Line from Schedule A/B: 10.1 ## \$150.00 \$150.00	5-3-1(a)
Line from Schedule A/B: 10.1 ——————————————————————————————————	5-3-1(a)
□ 100% of fair market value, up to	
Clothing (300.00) \$300.00 \$300.00 \$300.00	5-3-1(a)
100% of fair market value, up to any applicable statutory limit	
Earned Income Tax Credit: Not to Unknown Unknown Unknown Unknown	5-3-1(i)
Line from Schedule A/B: 28.1 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit	
Federal Income Tax Refund: Not to Unknown Unknown Unknown Unknown Unknown	5-3-1(j)
Line from Schedule A/B: 28.2 100% of fair market value, up to any applicable statutory limit	
State Income Tax Refund: Not to Unknown Unknown Unknown Unknown Unknown	5-3-1(k)
Line from Schedule A/B: 28.3 Line from Schedule A/B: 28.3 Diamond 100% of fair market value, up to any applicable statutory limit	
 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No 	
The Nick and the second and the second and the second and the second sec	
 ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No 	

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		Document Pa	age 10	of 37	<u> </u>	
Fill i	n this information to identify you	ur case:				
Debt	or 1 Stephanie Ren	ee Ray				
	First Name	Middle Name Last	t Name			
Debt (Spou	se if, filing) First Name	Middle Name Las	t Name			
Linite	ed States Bankruptcy Court for the	: NORTHERN DISTRICT OF MISSIS	SIPPI			
Office	ed States Bankruptcy Court for the	NORTHERN DISTRICT OF WISSIS	<u> </u>			
Case (if kno	e number <u>19-10401</u> wn)				_	if this is an ded filing
Oπ:	aial Farra 100D					
	cial Form 106D					
Sci	nedule D: Creditors	S Who Have Claims See	cured	by Property	<u> </u>	12/15
is nee		If two married people are filing together, bo out, number the entries, and attach it to this				
1. Do	any creditors have claims secured b	y your property?				
	☐ No. Check this box and submit	this form to the court with your other sche	dules. Yo	u have nothing else to	report on this form.	
ı	Yes. Fill in all of the information	below.				
Part	1: List All Secured Claims					
for ea	ach claim. If more than one creditor ha	more than one secured claim, list the creditors is a particular claim, list the other creditors in Paical order according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Ackerman Finance (p)	Describe the property that secures the cl	aim:	\$885.05	\$100.00	\$785.05
	PO Box 915 Ackerman, MS 39735	Pay Value of Cash Received 11/2 (100.00) - All Collateral Exempt: EXEMPT: PS3 w/ Games (75.00), Blue Ray Player (50.00) - VALUE<200.00 EXEMPT: 40" TV (150.00), 52" TV (195.00), DVD Player (25.00) As of the date you file, the claim is: Check apply. □ Contingent	,			
	Number, Street, City, State & Zip Code	Unliquidated				
Who	owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	ebtor 1 only	An agreement you made (such as mortg	age or secu	ıred		
	ebtor 2 only	car loan)				
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
_	t least one of the debtors and another	☐ Judgment lien from a lawsuit	n Duraha	naa Manay Caayrid	in .	
	heck if this claim relates to a community debt	Other (including a right to offset)	1-Purcna	se Money Securit	У	
Date	debt was incurred 8/20/2018	Last 4 digits of account number	2018			
2.2	Consumer Credit of Eupora	Describe the property that secures the cl	aim:	\$264.12	\$0.00	\$264.12
	PO Box 706	All Collateral Exempt/Jr. Lien: EXEMPT: Blue Ray Player (50.00 VALUE<200.00 EXEMPT: 48" TV (175.00), 50" TV (195.00) - JR. Ll. 32" TV [Tower] As of the date you file, the claim is: Check apply.	EN:			
	Eupora, MS 39744	☐ Contingent				

Who owes the debt? Check one.

Official Form 106D

Number, Street, City, State & Zip Code

Unliquidated

Nature of lien. Check all that apply.

☐ Disputed

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Debto	or 1 Stephanie Renee Ray		(Case number (if known)	19-10401	
	First Name Middle N	lame Last Name				
	btor 1 only btor 2 only	☐ An agreement you made (such as car loan)	mortgage or sec	cured		
	btor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
	least one of the debtors and another	☐ Judgment lien from a lawsuit	orianio o non			
	eck if this claim relates to a	Other (including a right to offset)	Non-Purch	ase Money Security		
CC	ommunity debt					
Date o	3/29/2016 [Refinanced debt was incurred <u>8/16/2018]</u>	Last 4 digits of account num	ber 9579			
1231	Consumer Credit of Eupora	Describe the property that secures	the claim:	\$100.00	\$0.00	\$100.00
	Creditor's Name	SURRENDER TO CODEBTO				
		Discharge Debt				
	DO D. 700	As of the date you file, the claim is:	Check all that			
	PO Box 706 Eupora, MS 39744	apply.				
-		Contingent				
	Number, Street, City, State & Zip Code	■ Unliquidated □ Disputed				
Who	owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ De	btor 1 only	☐ An agreement you made (such as	mortgage or sec	cured		
_	btor 2 only	car loan)				
	btor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
_	least one of the debtors and another	☐ Judgment lien from a lawsuit	Non Durch	ana Manay Casyrity		
	eck if this claim relates to a ommunity debt	Other (including a right to offset)	Non-Purch	ase Money Security		
	-					
	3/29/2016 [Refinanced	,				
Date o	debt was incurred 11/14/2016]	Last 4 digits of account num	ber			
		_				
$\overline{}$	Tower Loan of Eupora (p)	Describe the property that secures		\$2,226.00	\$0.00	\$2,226.00
	Creditor's Name	All Collateral Exempt: EXEM				
		TV (300.00), xBox 360 (75.00 (50.00), Blue Ray Player (50				
		45mm Pistol (150.00) -	.00),			
		VALUE<200.00 EXEMPT: 32				
		(100.00), 2nd Blue Ray Play As of the date you file, the claim is:	er (50.00)			
	PO Box 369	apply.	Check all that			
_	Eupora, MS 39744	Contingent				
	Number, Street, City, State & Zip Code	■ Unliquidated				
Who	owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ De	btor 1 only	☐ An agreement you made (such as	mortgage or sec	cured		
	btor 2 only	car loan)	0 0			
	btor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
_	least one of the debtors and another	☐ Judgment lien from a lawsuit				
	neck if this claim relates to a community debt	Other (including a right to offset)	Non-Purch	ase Money Security		
Date o	debt was incurred 6/1/2018	Last 4 digits of account num	ber <u>4577</u>			
	Webster Finance Co.					
2.5				\$2,192.00	\$0.00	\$2,192.00

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1 Stephanie Renee Ray		Case number (if known)	19-10401	
First Name Middle N	lame Last Name			
Creditor's Name	Pay as Unsecured			
c/o William Tollison, as	r uy us onscoured			
agent				
P.O. Box 266	As of the date you file, the claim is: Check apply.	all that		
Eupora, MS 39744	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortg car loan)	age or secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	o s nen		
☐ Check if this claim relates to a	=	UCC - Exempt		
community debt	— Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number	7603		
WWC Finance, Inc (reg				
2.6 agent)	Describe the property that secures the cl	laim: \$7,831.80	\$6,930.00	\$901.80
Creditor's Name	2007 Ford Explorer Eddie Bauer	r		
c/o Bruce Eric Weeks	151000 miles			
451 West Madison	VIN: 1FMEU64807UB36639			
PO Box 567	As of the date you file, the claim is: Check apply.	all that		
Houston, MS 38851	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortg	age or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	е		
Date debt was incurred 3/2018	Last 4 digits of account number	4977		
Add the dollar value of your entries in C	Column A on this page. Write that number h	ere: \$13,498.	.97	
If this is the last page of your form, add	the dollar value totals from all pages.	\$13,498.		
Write that number here:		410,100		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
trying to collect from you for a debt you o	pe notified about your bankruptcy for a debowe to someone else, list the creditor in Part tyou listed in Part 1, list the additional credits page.	rt 1, and then list the collection ager	ncy here. Similarly, if you	have more
	7. 0 .			
Name, Number, Street, City, State &		On which line in Part 1 did you ente	r the creditor? 2.1	
Ackerman Finance (reg age c/o Bobby Joe Hood, Sr.	ziit)	Last 4 digits of account number		
8910 MS Hwy 15		Last + digits of account number		
Ackerman. MS 39735				

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Ŭ	400 10 10+01 ODW	Documer	nt Page 13 of 37	0.41 D	COO MAIN
Fill in this	information to identify your of				
Debtor 1	Stephanie Renee	Rav			
	First Name	Middle Name	Last Name		
Debtor 2	, <u>Fig. 1</u>	A			
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT (OF MISSISSIPPI		
Case numb	per 19-10401				
(if known)				☐ Ch	eck if this is an
				am	nended filing
	Form 106E/F Ile E/F: Creditors W	ho Have Unsecu	red Claims		12/15
			CIORITY claims and Part 2 for creditors with NONPR	RIORITY claim	
Schedule G: Schedule D: left. Attach tl	Executory Contracts and Unexpi Creditors Who Have Claims Sect	red Leases (Official Form 10 ured by Property. If more spa	Also list executory contracts on Schedule A/B: Pro 6G). Do not include any creditors with partially sec ice is needed, copy the Part you need, fill it out, nuito report in a Part, do not file that Part. On the top	ured claims to mber the entr	hat are listed in ies in the
Part 1:	List All of Your PRIORITY Un	secured Claims			
	creditors have priority unsecured	d claims against you?			
No. 0	Go to Part 2.				
☐ Yes.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
	creditors have nonpriority unsec		rt with your other schedules.		
Yes.					
unsecur	ed claim, list the creditor separately	for each claim. For each claim	r of the creditor who holds each claim. If a creditor I n listed, identify what type of claim it is. Do not list claim If you have more than three nonpriority unsecured clain	ns already inclu	ided in Part 1. If more
					Total claim
4.1 A	liance Collection Svc. Inc	(reg.) Last 4 digits	of account number		Unknown
	npriority Creditor's Name			_	
P.	o Jeff Chambers, as agent O. Box 49 Ipelo, MS 38802	When was the	e debt incurred?		
	mber Street City State Zlp Code	As of the date	e you file, the claim is: Check all that apply		
Wh	no incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent	t		
	Debtor 2 only	Unliquidate	ed		
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	ther Type of NONI	PRIORITY unsecured claim:		
	Check if this claim is for a comn	nunity	ans		
del	bt	☐ Obligations	s arising out of a separation agreement or divorce that	you did not	
_	he claim subject to offset?	report as prior			
_		☐ Debts to pe	ension or profit-sharing plans, and other similar debts		
	Yes	Other. Spe	cify Collections		

Best Case Bankruptcy

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Case 19-10401-SDM Desc Main Document Page 14 of 37 Debtor 1 Stephanie Renee Ray ase number (if known) 19-10401 4.2 Bank of Kilmichael Last 4 digits of account number Unknown Nonpriority Creditor's Name 1079 Veterans Memorial Boulevard When was the debt incurred? Eupora, MS 39744 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Insufficient Funds ☐ Yes 4.3 Community Choice Financial Last 4 digits of account number \$240.00 Nonpriority Creditor's Name d/b/a All American Check Cashing When was the debt incurred? of Colu 3189 Highway 45 North Columbus, MS 39705 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Check Loan Other. Specify 4.4 Daries Nickerson Last 4 digits of account number Unknown Nonpriority Creditor's Name When was the debt incurred? 24 Hodges Drive, Apt 104A Eupora, MS 39744 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Codebtor

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Document Page 15 of 37 Debtor 1 Stephanie Renee Ray se number (if known) 19-10401 4.5 Franklin Collection Service Last 4 digits of account number Unknown Nonpriority Creditor's Name P.O. Box 3910 When was the debt incurred? Tupelo, MS 38803 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.6 Money Man (reg. agent) Last 4 digits of account number \$1,105.60 Nonpriority Creditor's Name c/o William Marcus Hendrix II, as When was the debt incurred? agent 3189 Hwy 45 North, Suite C Columbus, MS 39705 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Signature Loan Other. Specify North MS Medical Center (p) \$500.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Franklin Collection Service When was the debt incurred? P.O. Box 3910 Tupelo, MS 38803 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Medical services rendered to petitioner

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify and/or family member

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Debtor	1 Stephanie Renee Ray	Case number (if known) 19-10401	
4.8	Quantum3 Group LLC (p) Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	P.O. Box 788	When was the debt incurred?	
	Kirkland, WA 98083-0788	A set of the later of the state	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.9	Tupelo Service Finance (as agent)	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name c/o Bruce J. Toppin, as agent 830 South Gloster Tupelo, MS 38801	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Collections	
		- Officer: Specify	
4.1 0	Webster Health Services	Last 4 digits of account number	\$1,234.53
	Nonpriority Creditor's Name c/o Bruce J. Toppin (reg agent) 830 South Gloster Tupelo, MS 38801	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	— 110	_ Medical services rendered to petitioner	
	Yes	Other. Specify and/or family member	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Case number (if known) Document 19-10401 Debtor 1 Stephanie Renee Ray Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Community Choice Financial (reg Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims agent) ■ Part 2: Creditors with Nonpriority Unsecured Claims c/o Corporation Service Company 7716 Old Canton Road Suite C Madison, MS 39110 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Franklin Collection Service Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 3910 ■ Part 2: Creditors with Nonpriority Unsecured Claims Tupelo, MS 38803 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Franklin Collection Service (reg. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims agent) Part 2: Creditors with Nonpriority Unsecured Claims c/o Dan Franklin, as agent P.O. Box 3910 Tupelo, MS 38803-3910 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Franklin Collection Service (reg. Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims agent) ■ Part 2: Creditors with Nonpriority Unsecured Claims c/o Dan Franklin, as agent P.O. Box 3910 Tupelo, MS 38803-3910 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? North MS Medical Center (reg. Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims agent) Part 2: Creditors with Nonpriority Unsecured Claims c/o Bruce J. Toppin, as agent 830 South Gloster Tupelo, MS 38801 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Tupelo Service Finance (p) Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1791 ■ Part 2: Creditors with Nonpriority Unsecured Claims Tupelo, MS 38802 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a. 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6b. 0.00 6b. 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 6d. Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f 6f 0.00

Total claims from Part 2

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$

6g. \$

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$

Debts to pension or profit-sharing plans, and other similar debts
Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ 0.00
3,080.13

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Total Nonpriority. Add lines 6f through 6i.

6j. \$ 3,080.13 Case 19-10401-SDM Doc 6 Filed 02/11/19 Entered 02/11/19 11:43:41 Desc Main

		1210000		
Fill in this infor	mation to identify your	case:		
Debtor 1	Stephanie Renee	Ray		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF MISSISSIPPI	
Case number	19-10401			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	Oity		Otate	Zii Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	- ',				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	July		Oldio	211 0000	
-	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	July		Olalo	<u> </u>	

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		Document	Page 20 of	37	•
Fill in this	s information to identify your	case:			
Debtor 1	Stephanie Renee	Ray			
.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF	MISSISSIPPI		
Case num	nber 19-10401				- Observativity in the con-
(II KHOWH)					Check if this is an amended filing
Codebtors		re also liable for any debts y			12/15 rate as possible. If two married needed, copy the Additional Page,
ill it out, a		boxes on the left. Attach the			pp of any Additional Pages, write
1. Do	you have any codebtors? (If	ou are filing a joint case, do r	not list either spouse a	s a codebtor.	
□ No					
■ Ye	S				
	thin the last 8 years, have you na, California, Idaho, Louisiana,				
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spou	ıse, or legal equivalent live wi	th you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make su	ire you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.1	Daries Nickerson			=	
_	24 Hodges Drive, Apt 104	4		■ Schedule D,□ Schedule E/F	
	Eupora, MS 39744			☐ Schedule E/F	, III E
				Consumer Cre	dit of Eupora

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Fill	in this information to identify your c	ase:							
	otor 1 Stephanie R				_				
	otor 2				-				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF MISSISSIPPI		_				
	se number				□ A		d filing ent showing		chapter
Of	fficial Form 106I				_		as of the follo	owing date:	
	chedule I: Your Inc	ome			N	/IM / DD/ Y	YYY		12/15
supį spoi attad	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sith you, do not include	spouse is de inform	living with ation about	you, inclu t your spo	ude informa	tion about e space is i	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filir	ng spouse	
	If you have more than one job,	Empleyment status	■ Employed			☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	Sewing						
	Include part-time, seasonal, or self-employed work.	Employer's name	Express Service	es, Inc					
	Occupation may include student or homemaker, if it applies.	Employer's address	c/o Flexsteel ind 9701 Boardwalk Oklahoma City,	Blvd.					
		How long employed the	here? _1 Mont	h		_			
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dise unless you are separated.	ate you file this form. If y	you have nothing to re	eport for a	ny line, write	e \$0 in the	space. Inclu	ide your nor	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all en	nployers for	that perso	n on the line	es below. If y	ou need
					For Del	btor 1	For Debt		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$1	,225.01	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$ 1,22	25.01	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Debt	tor 1	Stephanie Renee Ray	_	C	Case number (if known)	19-10	401		
					For Debtor 1	For D	ebtor	2 or	
								pouse	
	Cop	y line 4 here	4.		\$ 1,225.01	\$		N/A	
5.	List	all payroll deductions:							
-	5a.	Tax, Medicare, and Social Security deductions	5a	1.	\$ 136.32	\$		N/A	1
	5b.	Mandatory contributions for retirement plans	5b		\$ 0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$ 0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	i.	\$ 0.00	\$		N/A	_
	5e.	Insurance	5e	€.	\$ 65.20	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$ 0.00	\$		N/A	
	5g.	Union dues	5g	J.	\$ 0.00	\$		N/A	
	5h.	Other deductions. Specify:	5h	1.+	\$ 0.00	+ \$		N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 201.52	\$		N/A	<u>l</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$1,023.49	\$		N/A	<u> </u>
8.		all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total							
	٠.	monthly net income.	8a		\$ 0.00	\$		N/A	_
	8b.	Interest and dividends	8b).	\$	\$		N/A	<u>l</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c		\$0.00	\$		N/A	<u> </u>
	8d.	Unemployment compensation	8d		\$	\$		N/A	_
	8e.	Social Security	8e	€.	\$ 0.00	\$		N/A	<u></u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance							
		that you receive, such as food stamps (benefits under the Supplemental							
		Nutrition Assistance Program) or housing subsidies.							
		Specify: Food Stamps	8f.		\$ 820.00	\$		N/A	<u> </u>
	8g.	Pension or retirement income	8g	,	\$0.00	\$		N/A	_
	8h.	Other monthly income. Specify: Family Assistance	_ 8h	1.+	\$ 400.00	+ \$		N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,220.00	\$		N/	Ά
			-						
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,243.49 + \$		N/A	= \$	2,243.49
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L						
11.	Incl	e all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your friends or relatives.		ende	ents, your roommate	s, and			
		not include any amounts already included in lines 2-10 or amounts that are not	availa	able	to pay expenses lis	ted in Sc	hedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12.	\$	2,243.49
	- 1- 1-							Combi	ned
40	_		•						ly income
13.	'	you expect an increase or decrease within the year after you file this form	?						
		No.							

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Fill	in this information to identify your case:			
Deb	Stephanie Renee Ray		heck if this is:	
	otor 2 ouse, if filing)		A supplement sl	ng howing postpetition chapter of the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF MISS	ISSIPPI	MM / DD / YYY	Υ
Cas	e number 19-10401			
(If k	nown)			
O.	fficial Form 106J			
S	chedule J: Your Expenses			12/1
info	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.	e filing together, both are e form. On the top of any add	equally responsible ditional pages, writ	e for supplying correct te your name and case
Par 1.	t 1: Describe Your Household Is this a joint case?			
1.	■ No. Go to line 2.			
	☐ Yes. Does Debtor 2 live in a separate household? ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Congress Household of F	Ochtor 2	
2.		Tor Separate Houserloid of L	Jeptor 2.	
۷.	Do you have dependents? No No Do not list Debtor 1 and Debtor 2. No Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents names.	Daughter	4	Yes
		Son	7	□ No ■ Yes
				□ No
		Son	8	■ Yes
		Son	10	□ No ■ Yes
		Son	14	□ No ■ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?			_
	t 2: Estimate Your Ongoing Monthly Expenses			
exp	timate your expenses as of your bankruptcy filing date unless y benses as of a date after the bankruptcy is filed. If this is a supp plicable date.			
the	lude expenses paid for with non-cash government assistance in value of such assistance and have included it on Schedule I: Y		Your e	expenses
(0)	ncial Form 100L)			
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage 4	. \$	450.00
	If not included in line 4:			
	4a. Real estate taxes	4a	. \$	0.00
	4b. Property, homeowner's, or renter's insurance		. \$	0.00
	4c. Home maintenance, repair, and upkeep expenses		. \$	0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as ho 		. \$. \$	0.00

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Debtor 1 Stephanie Renee Ray Case number (if known) 19-10401

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Debtor 1 Stephanie Renee Ray	Case number (if known)	19-10401
Hallaine		
. Utilities: 6a. Electricity, heat, natural gas	6a. \$	200.00
6b. Water, sewer, garbage collection	6b. \$	45.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	
6d. Other. Specify:	6d. \$	115.00
· · · · · · · · · · · · · · · · · · ·		0.00
Food and housekeeping supplies Childcare and children's education costs	*	820.00
	8. \$	50.00
Clothing, laundry, and dry cleaning	9. \$	50.00
). Personal care products and services	10. \$	25.00
Medical and dental expenses	11. \$	25.00
2. Transportation. Include gas, maintenance, bus or train fare.	12. \$	100.00
Do not include car payments. B. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	
. Charitable contributions and religious donations	14. Ф	0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	115.00
15d. Other insurance. Specify:	15d. \$	0.00
. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	13u. ψ	0.00
Specify: Car Tag & Registration	16. \$	10.00
7. Installment or lease payments:	10. Ψ	10.00
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
 Your payments of alimony, maintenance, and support that you did not report as 	· · · <u></u>	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form or on School	edule I: Your Income.	
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
. Other: Specify:	21. +\$	0.00
· · ·		0.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	2,005.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	2,005.00
• • • •		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3. Calculate your monthly net income.	00 6	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,243.49
23b. Copy your monthly expenses from line 22c above.	23b\$	2,005.00
On Cubiract your monthly over anone from the control of the contro		
 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c. \$	238.49
The result is your monthly net income.	200. *	
4. Do you expect an increase or decrease in your expenses within the year after you	ou file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect you		ease or decrease because of a
modification to the terms of your mortgage?		
■ No.		
☐ Yes. Explain here:		

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Fill in this info	ormation to identify your	case:			
Debtor 1	Stephanie Renee				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
Case number	19-10401				
(if known)					Check if this is an amended filing
If two married You must file to obtaining mor years, or both	ney or property by fraud i . 18 U.S.C. §§ 152, 1341, 1	r, both are equally respoi le bankruptcy schedules n connection with a bank	nsible for supplying co	orrect information. s. Making a false state	ement, concealing property, or 0, or imprisonment for up to 20
	ign Below pay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes	. Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules fi	led with this declaration	on and
X /s/ S	tephanie Renee Ray		X		
Step	hanie Renee Ray sture of Debtor 1		Signature o	of Debtor 2	
Date	February 11. 2019		Date		

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Fill	in this inforn	nation to identify you	case:			
Deb	tor 1	Stephanie Rene	e Ray Middle Name	Last Name		
Deb	tor 2	i iist ivaille	Wildlie Name	Last Name		
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF MISSISSIPPI		
Cas	e number	19-10401				
(if kn	own)				_	theck if this is an
					a	mended filing
Ot∙	icial Ec	rm 107				
	ficial Fo		Affaira far Individ	luals Eiling for D	onkruptov	414.6
			Affairs for Individ			4/16
					equally responsible for sup additional pages, write you	
		n). Answer every que			,	
Par	Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married					
	■ Not mar					
2			lived anywhere other than v	where you live new?		
2.	During the id	ast 3 years, nave you	iived anywhere other than t	where you live now?		
	■ No					
	☐ Yes. Lis	it all of the places you l	ived in the last 3 years. Do no	of include where you live now	'.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
,	Within the le	nat O vacua did vav av		el cavivalent in a commun	it., n.e.no.ut., ototo ou touritou	
					ity property state or territory co, Texas, Washington and W	
	■ No					
	■ No □ Yes. Ma	ake sure vou fill out <i>Sch</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
		·	`			
Par	Explai	n the Sources of You	r Income			
4.	Did you hav	e any income from en	nployment or from operatin	g a business during this ye	ear or the two previous cale	ndar years?
		•	u received from all jobs and a have income that you receive			
	_	.g a jo oaoo aa joa	mare meeme and year recent	s togothor, not it omy once all		
	□ No	lia tha dataila				
	■ Yes. Fill	l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
				exclusions)		and exclusions)
		of current year until	■ Wages, commissions,	\$1,225.01	☐ Wages, commissions,	
tne	date you file	d for bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Stephanie Renee Ray

				Debtor 1					Debtor	2				
Source		Sources	of income that apply.	(be	oss income efore deduct clusions)		Source	Sources of income Check all that apply.		(b	ross income efore deducti nd exclusions	ions		
For last ca			1, 2018)	■ Wages bonuses,	s, commissions, tips			\$260.00	☐ Wag		missions,			
				☐ Opera	ting a business				☐ Oper	ating a	ousiness			
For the ca				■ Wages bonuses,	s, commissions, tips			\$0.00	☐ Wag		missions,			
				☐ Opera	ting a business				☐ Oper	ating a	ousiness			
and ot winnin	ther publ	lic benefi u are filir ce and th	t payments; ng a joint cas ne gross inco	pensions; re e and you l	me is taxable. Exa ental income; inter nave income that y ach source separa	rest; di you red	ividends; mo ceived toge	oney collecte ther, list it or	ed from la nly once u	wsuits; Inder De	royalties; a btor 1.	Secur and ga	ity, unemploy mbling and lo	ment,
				Debtor 1					Debtor	2				
				Sources of Describe b	of income pelow.	eac (be	oss income ch source efore deduct clusions)		Source: Describe			(b	ross income efore deducti nd exclusions	ions
Part 3:	List Ce	rtain Pay	ments You	Made Befo	ore You Filed for	Bankr	ruptcy							
<u> </u>	No. Ne ind ind	ither De lividual p ring the 9 l No. l Yes Subject to	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include adjustment Pebtor 2 o 90 days befo Go to line 7 List below e	ebtor 2 ha personal, f re you filed hach creditor editor. Do n payments t on 4/01/19 r both have re you filed hach creditor	imarily consumes sprimarily consumity, or househo for bankruptcy, dient to whom you paid ot include paymer of an attorney for the and every 3 years for bankruptcy, dient to whom you paid or to whom you paid to sprimarily consumity consu	id you id a tot its for his bar s after id you	debts. Conspose." pay any cre tal of \$6,425 domestic sunkruptcy cas r that for cas debts. pay any cre tal of \$600 c	ditor a total * or more in pport obliga se. es filed on o ditor a total or more and	of \$6,425 n one or mations, such or after the of \$600 of the total a	* or moi nore pay ch as ch e date o r more?	e? ments and ild support adjustme	d the to t and a nt.	otal amount yo ilimony. Also, ditor. Do not	ou do
				ments for d	omestic support o									to an
Cred	litor's Na	ame and	Address		Dates of payme	ent	Total a	mount paid	Amoun still	t you owe	Was this	s payn	nent for	

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Debtor 1 Stephanie Renee Ray

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	_ 110							
				_				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ecount of a de	ebt that benefited an		
	■ No							
	Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name		
Pa	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	No. Go to line 11. Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Branerty		Data		Value of the		
	Creditor Name and Address	Describe the Property Explain what happened	4	Date		property		
		Explain what happened	4					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fii	nancial institution	, set off any a	mounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount		
	Orealtor Name and Address	bescribe the action the	creditor took	taken		Amount		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a		
	□ Yes							
Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup	etcy, did you give any gift	s with a total value	of more than \$60	0 per person?	•		
	■ No	- · · · ·			-			
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave	Value		
	Person to Whom You Gave the Gift and Address:							

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14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or c			ns with a total	value of more than	\$600 to any charity?		
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value		
Pai	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	ou lose anyth	ning because of thef	t, fire, other disaster,		
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. Loc claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost		
Pai	t 7: List Certain Payments or Transfers	6						
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or plinclude any attorneys, bankruptcy petition process.	preparin	g a bankruptcy petition?			rty to anyone you		
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou"	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment		
	Abacus Credit Counseling 15760 Ventura Boulevard Suite 700 Encino, CA 91436 www.abacuscc.org		Pre-Filing Credit Counseling C	Course	1/29/2019	\$25.00		
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that No	ditors or	to make payments to your creditor		r transfer any prope	rty to anyone who		
	Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No							
	Yes. Fill in the details. Person Who Received Transfer		Description and value of	Describe	ny property or	Date transfer was		
	Address		property transferred		received or debts	made		
	Person's relationship to you							

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Debtor 1 Stephanie Renee Ray

19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot		ny property to a	a self-settle	ed trust or similar device	of which you are a
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and	value of the pro	operty trans	sferred	Date Transfer was made
Pa	Int 8: List of Certain Financial Accounts, Inst	truments. Safe Denosi	it Boxes, and S	torage Uni	ts	
	<u> </u>	•	·	•		b66bd
20.	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accou	ınts; certificate	s of depos		,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or	Last balance before closing or transfer
					transferred	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed fo	r bankruptcy, a	nny safe de	posit box or other depos	sitory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
20	Harris and the state of the sta			4		0
22.	Have you stored property in a storage unit or	r place other than you	r nome within	i year beto	re you filed for bankrupt	cy?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control f	•				
23.	Do you hold or control any property that som for someone.	neone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Ρo	rt 10: Give Details About Environmental Info	rmation				
Га	III 10. Give Details About Environmental info	imation				
For	the purpose of Part 10, the following definition	ns apply:				
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, groun			
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	as defined under any		law, wheth	ner you now own, operat	e, or utilize it or used
	Hazardous material means anything an envir		as a hazardou	s waste, ha	azardous substance, tox	ic substance,

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Stephanie Renee Ray

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	trative proceeding under any envir	onmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Conr	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have any	y of the following connections to any	/ business?				
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partnershi	p (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing executi	ve of a corporation						
	☐ An owner of at least 5% of the voting or	equity securities of a corporation						
	■ No. None of the above applies. Go to Part 1	2.						
	☐ Yes. Check all that apply above and fill in th	ne details below for each business						
		scribe the nature of the business	Employer Identification numbe					
	Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed							
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	e Issued						

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Debtor 1 Stephanie Renee Ray

Part 1	2: Sign Below		
are tru with a	e and correct. I under	this Statement of Financial Affairs and any attachments, and I declare under perstand that making a false statement, concealing property, or obtaining money result in fines up to \$250,000, or imprisonment for up to 20 years, or both.	, , , ,
/s/ St	ephanie Renee Ray	,	
Stepl	nanie Renee Ray	Signature of Debtor 2	_
Signa	ture of Debtor 1		
Date	February 11, 2019	Date	_
Did vo	u attach additional pa	ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptc	v (Official Form 107)?
■ No		3	, (=,
☐ Yes			
Did yo	u pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?	
■ No			
☐ Yes	Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Of	ficial Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Mississippi

In	re Stephanie Renee Ray		Case No.	19-10401
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	ENSATION OF ATTORNE	Y FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, or agi	reed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,600.00
	Prior to the filing of this statement I have received	1	\$	0.00
			\$	3,600.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person unless	they are memb	pers and associates of my law firm
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects of th	e bankruptcy ca	ase, including:
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, standard c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secure of the secu	atement of affairs and plan which may lead to sand confirmation hearing, and any reduce to market value; exemptions as needed; preparation and	be required; adjourned hear on planning;	rings thereof; preparation and filing of
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.	ee does not include the following serviolischargeability actions, judicial li	ce: en avoidance	es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for paym	ent to me for re	epresentation of the debtor(s) in
	February 11, 2019	/s/ William C. Cunning	ham	
	Date	William C. Cunninghai	n 7964	
		Signature of Attorney William C. Cunninghai	n	
		P.O. Box 624		
		817 2nd Avenue North Columbus, MS 39703		
		662-329-2455 Fax: 66	2-329-4411	
		wccsinc@gmail.com		
		Name of law firm		

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United States Bankruptcy Court Northern District of Mississippi

In re	Stephanie Renee Ray		Case No.	19-10401	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge						
		Signature of Debtor				

Ackerman Finance (p) PO Box 915 Ackerman, MS 39735

Ackerman Finance (reg agent) c/o Bobby Joe Hood, Sr. 8910 MS Hwy 15 Ackerman, MS 39735

Alliance Collection Svc. Inc (reg.) c/o Jeff Chambers, as agent P.O. Box 49
Tupelo, MS 38802

Bank of Kilmichael 1079 Veterans Memorial Boulevard Eupora, MS 39744

Community Choice Financial d/b/a All American Check Cashing of Colu 3189 Highway 45 North Columbus, MS 39705

Community Choice Financial (reg agent) c/o Corporation Service Company 7716 Old Canton Road Suite C Madison, MS 39110

Consumer Credit of Eupora PO Box 706 Eupora, MS 39744

Franklin Collection Service P.O. Box 3910 Tupelo, MS 38803

Franklin Collection Service (reg. agent) c/o Dan Franklin, as agent P.O. Box 3910 Tupelo, MS 38803-3910

Money Man (reg. agent) c/o William Marcus Hendrix II, as agent 3189 Hwy 45 North, Suite C Columbus, MS 39705 North MS Medical Center (p) c/o Franklin Collection Service P.O. Box 3910 Tupelo, MS 38803

North MS Medical Center (reg. agent) c/o Bruce J. Toppin, as agent 830 South Gloster Tupelo, MS 38801

Quantum3 Group LLC (p) P.O. Box 788 Kirkland, WA 98083-0788

Tower Loan of Eupora (p) PO Box 369 Eupora, MS 39744

Tupelo Service Finance (as agent) c/o Bruce J. Toppin, as agent 830 South Gloster Tupelo, MS 38801

Tupelo Service Finance (p) P.O. Box 1791
Tupelo, MS 38802

Webster Finance Co. (reg. agent) c/o William Tollison, as agent P.O. Box 266 Eupora, MS 39744

Webster Health Services c/o Bruce J. Toppin (reg agent) 830 South Gloster Tupelo, MS 38801

WWC Finance, Inc (reg agent) c/o Bruce Eric Weeks 451 West Madison PO Box 567 Houston, MS 38851